

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**CARSON AMERICA**

**A. Full Name (Last, First, Middle Initial)**

**MR. THOMAS J. STOREY**

Mailing Address 10101 AUSTRIAN WAY

City	State	Zip Code
OAK PARK	MI	48237-1879

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**MCA DETROIT**

Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**3875.00**

**Transaction ID : SA17.75858**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**500.00**

**B. Full Name (Last, First, Middle Initial)**

**JO STORY**

Mailing Address 1476 GRACE AVENUE

City	State	Zip Code
LANCASTER	SC	29720-4261

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STORY EYE**

Occupation  
**CERTIFIED OPHTHALMIC TECHNICIAN**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2000.00**

**Transaction ID : SA17.130625**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**1000.00**

**C. Full Name (Last, First, Middle Initial)**

**MR. DONALD STOTT**

Mailing Address 111 BELLEVUE AVENUE

City	State	Zip Code
SUMMIT	NJ	07901-2000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED PER BEST  
EFFORTS**

Occupation  
**INFORMATION REQUESTED PER BEST  
EFFORTS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

**Transaction ID : SA17.201794**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

**CONTRIBUTION**

Amount of Each Receipt this Period

**1000.00**

**Subtotal Of Receipts This Page (optional)**.....

**2500.00**

**Total This Period (last page this line number only)**.....